

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: D.H. Vu
TAKEO TSUKAMOTO)	Crown Aut IInite 2021
Application No.: 10/799,859)	Group Art Unit: 2821
	:	
Filed: March 15, 2004)	
For: ELECTRON-EMITTING DEVICE,		
ELECTRON-EMITTING	:	
APPARATUS, IMAGE DISPLAY)	
APPARATUS, AND LIGHT-	:	
EMITTING APPARATUS)	April 6, 2004
Mail Stop		
Commissioner for Patents		
P.O. Box 1450		
Alexandria, VA 22313-1450		

SUPPLEMENTAL PRELIMINARY AMENDMENT

Sir:

Preliminary to examination, and after entry of the Preliminary Amendment filed on March 15, 2004, please further amend the above-identified application as follows.

In re Application of:

Docket No. 03500.015727.1

TAKEO TSUKAMOTO

Application No.: 10/799,859

Filed: March 15, 2004

Examiner: D.H. Vu

Group Art Unit: 2821

For: ELECTRON-EMITTING DEVICE, ELECTRON-

EMITTING APPARATUS, IMAGE DISPLAY APPARATUS, AND LIGHT-EMITTING

APPARATUS

Date: April 6, 2004

MAIL STOP THE COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Supplemental Preliminary Amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

		С	LAIMS AS AMEN	NDED		
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 21	MINUS	** 20	= 1	x \$9 \$18	\$ 18.00
INDEP. CLAIMS	* 4	MINUS	***	= 1	x \$43 \$86	\$ 86.00
Fee for Multiple Dependent claims \$145°/\$290					-0-	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT			\$ 104.00			

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

	Verified Statement claiming small entity status is enclosed, if not filed previously.
X	A check in the amount of \$104.00 is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
X .	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	Attorney for Applicant Registration No. 42, 4.76

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200

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